

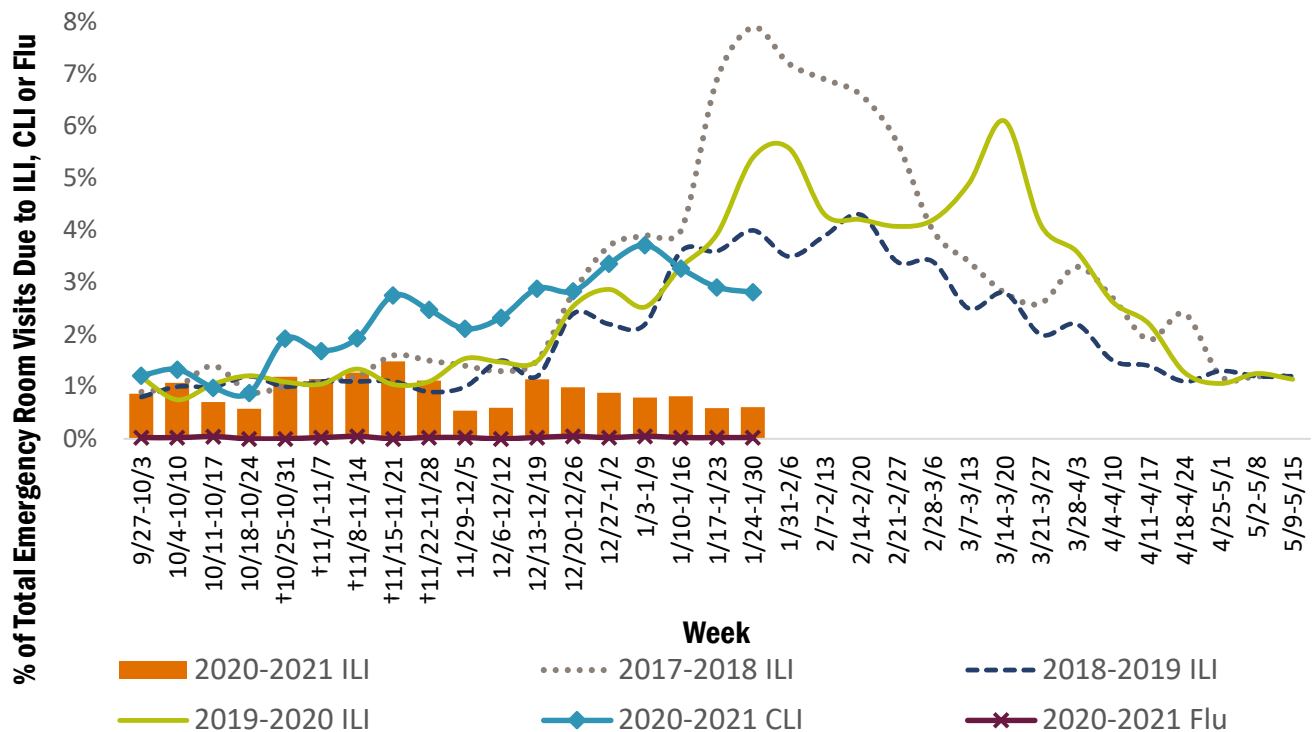
Timeframe: 1/24/2021 – 1/30/2021

- Geographic spread remains sporadic.
- Flu activity is currently unusually low in Vermont and nationally. Flu activity may increase in the coming months.
- The COVID-19 pandemic may influence influenza surveillance through changes to health seeking behaviors, influenza testing capacity, implemented hygiene and physical distancing measures, and staffing/routines in sentinel sites. Current influenza surveillance data should be interpreted with consideration of these factors. Follow these links for up-to-date [Vermont](#) and [national](#) COVID-19 data.



Syndromic Surveillance

Vermont Emergency Room and Urgent Care Visits for Influenza-like Illness, COVID-19-like Illness, or Diagnosed Influenza



*Geographic spread: estimated level of geographic spread of influenza activity in the state. This level does not measure the severity of influenza activity. States report [geographic spread](#) of influenza activity as no activity, sporadic, local, regional, or widespread.

†During the week of October 25, the UVM Health Network experienced a [confirmed cyberattack](#) affecting data reporting (ongoing through report week ending 11/21). Interpret data with caution.

Flu Surveillance Report

Illness Definitions

COVID-19-like Illness (CLI): determined using the patient's chief complaint and/or discharge diagnosis. CLI is the presence of a fever with the addition of shortness of breath, difficulty breathing, or cough. CLI excludes patients with an influenza discharge diagnosis.

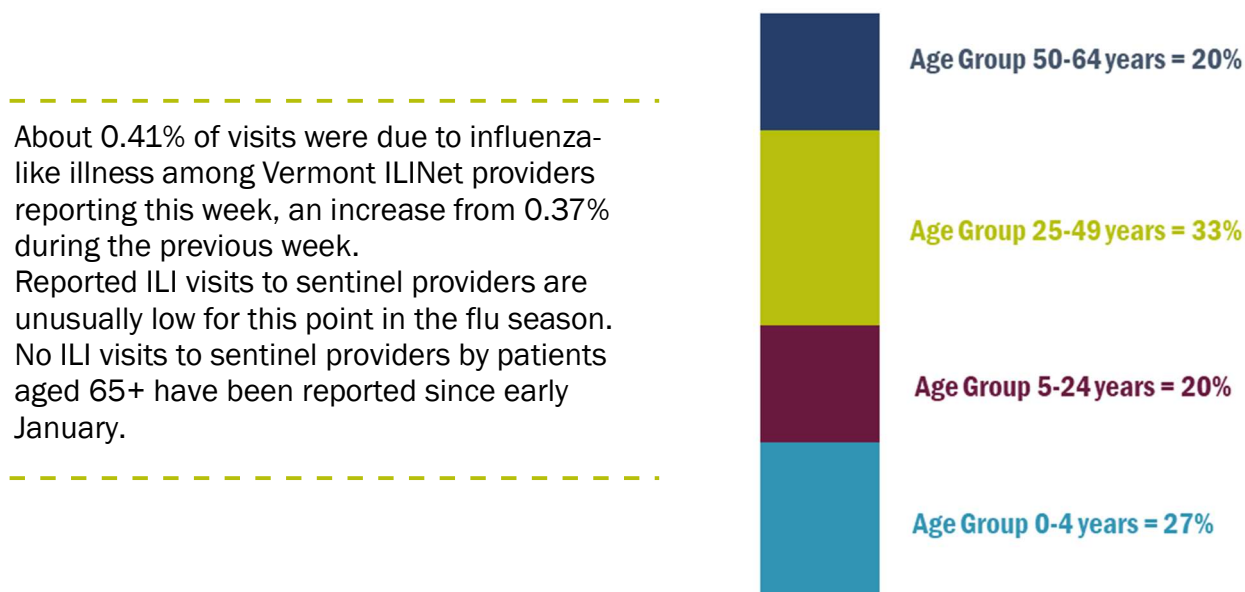
Influenza-like Illness (ILI): determined using the patient's chief complaint and/or discharge diagnosis. ILI is the presence of a fever with the addition of cough or sore throat. ILI excludes patients with a non-ILI fever (e.g. Dengue, Malaria, or Yellow Fever).

Influenza (Flu): determined by the patient's chief complaint of a fever with the addition of cough or sore throat and a discharge diagnosis of influenza.

ILINet Sentinel Provider Data

This surveillance data is based upon reports submitted by ILINet, a nationwide group of medical offices that act as influenza sentinels. Sentinel providers report the number of patients with an influenza-like illness (ILI) seen by their practices each week.

Age Distribution of Patients with an Influenza-like Illness



Laboratory Data

The **Health Department Lab** performs subtype testing to determine the type of flu, for example H3, H1N1, etc. This information helps determine the circulating virus strains.

| Type and Subtype | This week: 1/24/21-1/30/21 | Season so far: 9/27/20-1/30/21 |
|------------------|-------------------------------|-----------------------------------|
| Flu A H3 | 0 | 0 |
| Flu A H1N1 | 0 | 0 |
| Flu B | 0 | 0 |

Flu Surveillance Report

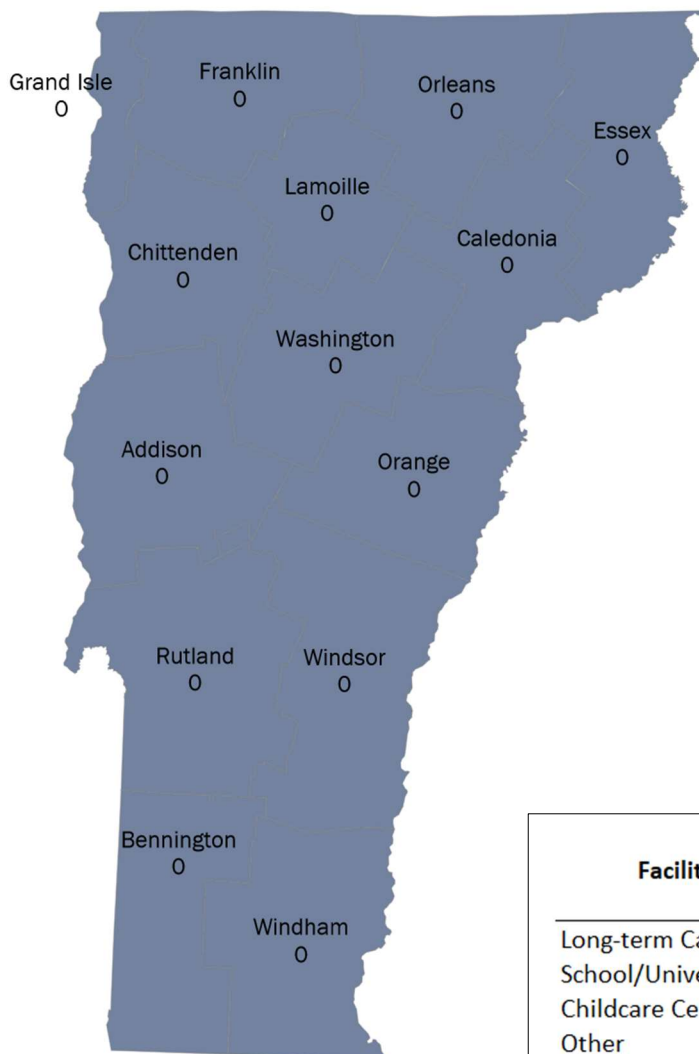
The National Respiratory and Enteric Virus Surveillance System (NREVSS) collects data on the number of PCR flu tests performed by participating Vermont labs and how many were positive. This helps determine flu activity in the community.

No flu PCR tests run this week were positive, no change compared to last week. Since the flu season started, less than 1% of flu PCR tests reported through NREVSS have been positive.

Reported Outbreaks

Institutional outbreaks of flu or influenza-like illness (excluding respiratory illnesses not caused by influenza viruses, e.g. COVID-19) are reportable to the Health Department.

Number of Influenza-like Illness and Influenza Lab Confirmed Outbreaks, 1/24/21 – 1/30/21



| Facility Type | # of Outbreaks | Full Season |
|-------------------------|---------------------|---------------------|
| | 1/24/21- 1/30/21 | 9/27/20- 1/30/21 |
| Long-term Care Facility | 0 | 0 |
| School/University | 0 | 0 |
| Childcare Center | 0 | 0 |
| Other | 0 | 0 |

For more information: Hilary Fannin hilary.fannin@vermont.gov